

This form must be completed and signed by the owner-of-record, their attorney and/or authorized agent. If form is not signed by property owner, please attach a signed letter of authorization designating the authorized agent.

*Appeal Must Be Typed*



**Thomas M. Menino**  
**Mayor**

**APPEAL**

under Boston Zoning Code

Boston, Massachusetts....., 20 .....

To the Board of Appeal in the Inspectional Services Department of the City of Boston:

The undersigned, being .....  
The Owner(s) or authorized agent

of the lot at .....  
number street ward district

hereby appeal(s) under St. 1956, c. 665, s. 8, to the Board of Appeal in the Inspectional Services Department of the City of Boston the action taken by the Inspectional Services Commissioner as outlined in the attached refusal letter.

DESCRIBE IN DETAIL THE REASON(S) FOR THIS APPEAL

STATE REASONS FOR THIS PROPOSAL

PROVIDE REASONS WHY BOARD SHOULD GRANT RELIEF

COMMENTS

OWNER.....

AUTHORIZED AGENT .....

ADDRESS.....

TELEPHONE.....

FAX.....